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APPLICANTS

William Kress Bodin, Austin, TX;

Michael John Burkhardt, Round Rock, TX;

Daniel G. Eisenhauer, Austin, TX; Daniel Mark Schumacher, Pflugerville, TX;

Thomas J. Watson, Pflugerville, TX;

[Signature] *Nure*
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[Signature] *Nure*
 ** FOREIGN APPLICATIONS *****

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 15	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials				

ADDRESS

34533

INTERNATIONAL CORP (BLF)

c/o BIGGERS & OHANIAN, LLP

P.O. BOX 1469

AUSTIN, TX

78767-1469

TITLE

Administering devices in dependence upon user metric vectors including relational metrics and location based device control

FILING FEE RECEIVED 930	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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